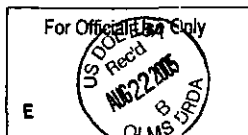


FORM LM-30

LABOR ORGANIZATION OFFICER AND EMPLOYEE REPORT

This report is mandatory under P.L. 86-257, as amended. Failure to comply may result in criminal prosecution, fines, or civil penalties as provided by 29 U.S.C. 439 or 440.



READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT.

1. File Number U - 003-111 10487	2. Fiscal Year Covered From: 01 / 01 / 04 Through: 12 / 31 / 04
3. Name and address of person filing. Name Guruis Miner P.O. Box, Bldg., Room No., if any Suite 301 Street 104 Interchange Plaza City Monroe State NJ ZIP Code + 4 08831	4. Name, file number, and address of labor organization. Local 199, Laborers International Name Union of North America, AFL-CIO Labor Organization File Number 003-111 P.O. Box, Building and Room Number, if any Street 532 S. Claymont Street City Wilmington State DE ZIP Code + 4 19801
5. Position in labor organization. Business Manager	

Enter appropriate data below if, during the past fiscal year, you or your spouse or minor child directly or indirectly had any of the following interests (except as specified in the exclusions set forth in the instructions):

A. Held an interest in, engaged in transactions (including loans) with, or derived income or other economic benefit of monetary value from an employer whose employees your organization represents or is actively seeking to represent.	
6. Name and address of Employer (including trade name, if any). Name Trade Name, if any: P.O. Box, Bldg., Room No., if any Street City State ZIP Code + 4	7.a. Nature of Interest, Transaction, or Income. 7.b. Amount.

Signature

15. Signature and verification. The undersigned declares, under penalty of Perjury and other applicable penalties of the law, that all of the information submitted in this report (including the information contained in any accompanying documents), has been examined by the signatory and is, to the best of the undersigned's knowledge and belief, true, correct, and complete. (See the section on penalties in the instructions.)	
Signed <u><i>Guruis Miner</i></u>	On <u>8-10-05</u> Date <u>609-462-6629</u> Telephone Number

Name of Person Filing	Oscar Minor	File Number U-	003-111
-----------------------	-------------	----------------	---------

B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

8. Name and address of Business (including trade name, if any).

Name Laborers Local 194 Benefit Fund of Delaware

Trade Name, if any:

P.O. Box, Bldg., Room No., if any 303

Street 650 Neamans Road

City Claymont

State DE ZIP Code + 4 19703

9. Business deals with:

- ☒ a. Labor Organization
- b. Trust
- c. Employer

10. If 9.b. or 9.c. is checked give trust or employer's name.

Name

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

Street

City

State ZIP Code + 4

11.a. Nature of such dealing.

Expenses advanced for attending meetings (See attached)

11.b. Approximate dollar value of such dealing. \$5,503.78

12.a. Nature of interest held or income received.

12.b. Amount.

C. Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value.

13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).

Name Marlowitz & Richman

Trade Name, if any:

P.O. Box, Bldg., Room No., if any Suite 1100

Street 121 S. Broad St

City Philadelphia

State PA ZIP Code + 4 19107

14.a. Nature of payment.

Dinner - February 19, 2004
Deep Blue Restaurant
Wilmington, DE

13.b. Is the Business an Employer or Consultant ?

14.b. Amount of payment. \$110.00

LABORERS LOCAL 199
LM-30 REPORTING
Gurvis Miner
2004

FUND	DATE PAID	ALLOCATED COST	DESCRIPTION OF BENEFIT
Pension	01/31/04	26.06	BOT Meeting Expense - 1/29/04
Pension	02/04/04	2,063.59	Orlando, FL Conference - 2/04
Pension	12/01/04	1,946.26	IFEBP Conference - New Orleans - 12/1/04 - 12/4/04
Welfare	02/04/04	687.86	Orlando, FL Conference - 2/04
Welfare	12/01/04	780.01	IFEBP Conference - New Orleans - 12/1/04 - 12/4/04